

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Rock City PAC

ADDRESS (number and street)

1015 Stonebridge Park Drive

☐Check if different  
than previously  
reported. (ACC)

Franklin

TN

37069

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00436410

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☒January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

1 1

2 3

2 0 1 0

through

1 2

3 1

2 0 1 0

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Kimberly Kaegi

Signature of Treasurer

Electronically Filed by Kimberly Kaegi

Date

0 8

0 3

2 0 1 1

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Rock City PAC

Report Covering the Period: From: 

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	265387.17
(b) Cash on Hand at Beginning of Reporting Period .....	151847.66	
(c) Total Receipts (from Line 19) .....	10147.82	224394.43
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	161995.48	489781.60
7. Total Disbursements (from Line 31) .....	23527.18	351313.30
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	138468.30	138468.30
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Rock City PAC

Report Covering the Period:

From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	2500.00	51850.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2500.00	51850.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	6000.00	153000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	8500.00	204850.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	1337.82	1337.82
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	15000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	310.00	3206.61
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	10147.82	224394.43
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	10147.82	224394.43

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	23527.18	138142.57	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	23527.18	138142.57	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	208170.73	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees .....	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	0.00	5000.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	23527.18	351313.30	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23527.18	351313.30	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	8500.00	204850.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8500.00	204850.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	23527.18	138142.57
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	1337.82	1337.82
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	22189.36	136804.75

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 12

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Rock City PAC

**A.**

Full Name (Last, First, Middle Initial)

Tom F. Cone

Mailing Address 825 N Curtiswood Ln

City

Nashville

State

TN

Zip Code

37204-4313

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cone Solvents, Inc.Occupation  
Owner

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	2		2	0	1	0

Transaction ID: 10103.C50247

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....

2500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 12

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rock City PAC

**A.**

Full Name (Last, First, Middle Initial)  
Independent Community Bankers PAC

Mailing Address Mr. K. Ronald Ence  
1615 L St NW Ste 900

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00032698

Name of Employer  
N/A

Occupation  
N/A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 5 / 2 0 1 0

Transaction ID: 10103.C50098

Amount of Each Receipt this Period

1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
InsurPAC

Mailing Address Mr. Charles E. Symington, Jr.  
412 1st St SE Ste 300

City State Zip Code  
Washington DC 20003-1804

FEC ID number of contributing  
federal political committee.

**C** C00022343

Name of Employer  
N/A

Occupation  
N/A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 6 / 2 0 1 0

Transaction ID: 01215.C50035

Amount of Each Receipt this Period

2500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
CME Group, Inc. PAC

Mailing Address Mr. Leo Melamed  
20 South Wacker Drive

City State Zip Code  
Chicago IL 60606

FEC ID number of contributing  
federal political committee.

**C** C00076299

Name of Employer  
N/A

Occupation  
N/A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 1 0

Transaction ID: 01215.C50045

Amount of Each Receipt this Period

2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

6000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 12

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Rock City PAC

**A.**

Full Name (Last, First, Middle Initial)

Toomey for Senate Committee

Mailing Address 2720 Jordan Road

City

Orefield

State

PA

Zip Code

18069-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1337.82

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 1 / 2 0 1 0

Transaction ID: 01215.C50046

Amount of Each Receipt this Period

1337.82

Offsets to Operating Expe-  
nditu

**SUBTOTAL** of Receipts This Page (optional) .....

1337.82

**TOTAL** This Period (last page this line number only) .....

1337.82



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 12

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Rock City PAC

**A.**

Full Name (Last, First, Middle Initial)

Pinnacle Bank

Mailing Address 211 Commerce St  
Suite 300

City State Zip Code  
Nashville TN 37201-1806

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
N/A

Occupation  
N/A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3063.54

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 4 / 2 0 1 0

Transaction ID: 01202.C50011

Amount of Each Receipt this Period

166.93

Interest Received

**B.**

Full Name (Last, First, Middle Initial)

Pinnacle Bank

Mailing Address 211 Commerce St  
Suite 300

City State Zip Code  
Nashville TN 37201-1806

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
N/A

Occupation  
N/A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3206.61

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 4 / 2 0 1 0

Transaction ID: 10131.C51957

Amount of Each Receipt this Period

143.07

Interest Received

**SUBTOTAL** of Receipts This Page (optional) .....

310.00

**TOTAL** This Period (last page this line number only) .....

310.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

**A.**

Full Name (Last, First, Middle Initial)  
The Ingram Group

Mailing Address 424 Church Street, Suite 1650

City Nashville State TN Zip Code 37219-

Purpose of Disbursement  
Consulting Fee - not candidate spec

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 01215.E4839

Date of Disbursement

/   /

Amount of Each Disbursement this Period

9000.00

CONSULTING FEE - NOT CAND-  
IDATE SPEC

**B.**

Full Name (Last, First, Middle Initial)  
Cardmember Service

Mailing Address PO Box 790408

City Saint Louis State MO Zip Code 63179-0408

Purpose of Disbursement  
CREDIT CARD: SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 10131.E4866

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1643.20

CREDIT CARD: SEE BELOW

**C.**

Full Name (Last, First, Middle Initial)  
Aristotle International, Inc.

Mailing Address 2285 Peachtree Rd NE

City Atlanta State GA Zip Code 30309-1119

Purpose of Disbursement  
Campaign Software

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 10131.E4869

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1094.22

**[MEMO ITEM]**  
MEMO: CAMPAIGN SOFTWARE

**SUBTOTAL** of Disbursements This Page (optional) .....

10643.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Rock City PAC

<b>A.</b> Full Name (Last, First, Middle Initial) The River Inn of Harbor Town River Inn	<b>Transaction ID:</b> 10131.E4871 <b>Date of Disbursement</b>																				
Mailing Address 50 Harbor Town Square	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	2		2	0	1	0												
City Memphis State TN Zip Code 38103-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Travel	<table border="1"> <tr> <td colspan="10">317.03</td> </tr> </table>	317.03																			
317.03																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>[MEMO ITEM]</b> MEMO: TRAVEL																					
<b>B.</b> Full Name (Last, First, Middle Initial) Dirksen South	<b>Transaction ID:</b> 10131.E4872 <b>Date of Disbursement</b>																				
Mailing Address First & Constitution	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	2		2	0	1	0												
City Washington State DC Zip Code 20001-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Meals	<table border="1"> <tr> <td colspan="10">79.00</td> </tr> </table>	79.00																			
79.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>[MEMO ITEM]</b> MEMO: MEALS																					
<b>C.</b> Full Name (Last, First, Middle Initial) The Honors Course, Inc.	<b>Transaction ID:</b> 10131.E4864 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 23176	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	4		2	0	1	0												
City Chattanooga State TN Zip Code 37422-3176	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Event Expense	<table border="1"> <tr> <td colspan="10">6257.44</td> </tr> </table>	6257.44																			
6257.44																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>EVENT EXPENSE</b>																					

**SUBTOTAL** of Disbursements This Page (optional) .....

6257.44

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Rock City PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Todd Womack

Mailing Address 604 N Crest Rd

City  
Chattanooga

State  
TN

Zip Code  
37404-1010

Purpose of Disbursement  
Consulting - not candidate specific

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 01215.E4840

Date of Disbursement

MM / DD / YYYY  
12 / 07 / 2010

Amount of Each Disbursement this Period

6625.00

CONSULTING - NOT CANDIDATE  
SPECIFIC

SUBTOTAL of Disbursements This Page (optional) .....

6625.00

TOTAL This Period (last page this line number only) .....

23525.64